

**Fill in this information to identify your case:**

Debtor 1 Waldemar Ruiz Cruz  
First Name Middle Name Last Name

Debtor 2 \_\_\_\_\_  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of New York

Case number \_\_\_\_\_  
(if known)

☐ Check if this is an amended filing

## Official Form 106Dec

## Declaration About an Individual Debtor's Schedules

12/15

**If two married people are filing together, both are equally responsible for supplying correct information.**

**You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Sign Below**

**Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?**

☒ No

☐ Yes. Name of person \_\_\_\_\_, Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

**Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.**

\* Waldemar Ruiz-Cruz  
Signature of Debtor 1

**X**  
\_\_\_\_\_  
Signature of Debtor 2

Date 08 28 2024  
MM / DD / YYYY

Date MM / DD / YYYY



Debtor 1

Waldemar Ruiz Cruz

First Name Middle Name Last Name

Case number (if known)

**4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

☐ No☒ Yes. Fill in the details.

	Debtor 1	Debtor 2
	Sources of Income Check all that apply.	Gross Income (before deductions and exclusions)
<b>From January 1 of current year until the date you filed for bankruptcy:</b>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
	\$ 12,000.00	\$
<b>For last calendar year:</b> (January 1 to December 31, 2023) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
	\$ 76,003.00	\$
<b>For the calendar year before that:</b> (January 1 to December 31, ) YYYY	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
	\$	\$

**5. Did you receive any other income during this year or the two previous calendar years?**Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

☒ No☐ Yes. Fill in the details.

	Debtor 1	Debtor 2
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
<b>From January 1 of current year until the date you filed for bankruptcy:</b>		
	\$	\$
	\$	\$
	\$	\$
<b>For last calendar year:</b> (January 1 to December 31, 2023) YYYY		
	\$	\$
	\$	\$
	\$	\$
<b>For the calendar year before that:</b> (January 1 to December 31, ) YYYY		
	\$	\$
	\$	\$
	\$	\$

Debtor 1

Waldemar Ruiz Cruz

First Name Middle Name Last Name

Case number (if known)

**Part 3: List Certain Payments You Made Before You Filed for Bankruptcy****6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- ☐ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225\* or more?

- ☐ No. Go to line 7.

- ☒ Yes. List below each creditor to whom you paid a total of \$6,225\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.

- ☐ Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- ☒ No. Go to line 7.

- ☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
_____	_____	\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Number _____ Street _____	_____			
City _____ State _____ ZIP Code _____				
Creditor's Name _____	_____	\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Number _____ Street _____	_____			
City _____ State _____ ZIP Code _____				
Creditor's Name _____	_____	\$ _____	\$ _____	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
Number _____ Street _____	_____			
City _____ State _____ ZIP Code _____				

Debtor 1

**Waldemar Ruiz Cruz**

First Name Middle Name Last Name

Case number (if known)

**7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

*Insiders* include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

☒ No☐ Yes. List all payments to an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name		\$	\$	
Number Street				
City State ZIP Code				
Insider's Name		\$	\$	
Number Street				
City State ZIP Code				

**8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

Include payments on debts guaranteed or cosigned by an insider.

☒ No☐ Yes. List all payments that benefited an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name		\$	\$	
Number Street				
City State ZIP Code				
Insider's Name		\$	\$	
Number Street				
City State ZIP Code				

Debtor 1

Waldemar Ruiz Cruz

First Name Middle Name Last Name

Case number (if known)

**Part 4: Identify Legal Actions, Repossessions, and Foreclosures****9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

☒ No☐ Yes. Fill in the details.

	Nature of the case	Court or agency	Status of the case
Case title _____ _____		Court Name _____	<input type="checkbox"/> Pending
Case number _____		Number _____ Street _____	<input type="checkbox"/> On appeal
		City _____ State _____ ZIP Code _____	<input type="checkbox"/> Concluded
Case title _____ _____		Court Name _____	<input type="checkbox"/> Pending
Case number _____		Number _____ Street _____	<input type="checkbox"/> On appeal
		City _____ State _____ ZIP Code _____	<input type="checkbox"/> Concluded

**10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**

Check all that apply and fill in the details below.

☒ No. Go to line 11.☐ Yes. Fill in the information below.

	Describe the property	Date	Value of the property
Creditor's Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____			\$ _____
	<b>Explain what happened</b>		
	<input type="checkbox"/> Property was repossessed.		
	<input type="checkbox"/> Property was foreclosed.		
	<input type="checkbox"/> Property was garnished.		
	<input type="checkbox"/> Property was attached, seized, or levied.		
Creditor's Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____			\$ _____
	<b>Explain what happened</b>		
	<input type="checkbox"/> Property was repossessed.		
	<input type="checkbox"/> Property was foreclosed.		
	<input type="checkbox"/> Property was garnished.		
	<input type="checkbox"/> Property was attached, seized, or levied.		

Debtor 1

**Waldemar Ruiz Cruz**

First Name Middle Name Last Name

Case number (if known)

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☒ No  
☐ Yes. Fill in the details.

Creditor's Name	Describe the action the creditor took	Date action was taken	Amount
Number Street			\$
City State ZIP Code			
Last 4 digits of account number: XXXX- - - -			

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

- ☒ No  
☐ Yes

### Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No  
☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift			\$
Number Street			\$
City State ZIP Code			
Person's relationship to you			
Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift			\$
Number Street			\$
City State ZIP Code			
Person's relationship to you			

Debtor 1

Waldemar Ruiz Cruz

First Name Middle Name Last Name

Case number (if known)

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

☒ No☐ Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities  
that total more than \$600

Describe what you contributed

Date you  
contributed

Value

Charity's Name

Number Street

City State ZIP Code

\$

\$

**Part 6: List Certain Losses**

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

☒ No☐ Yes. Fill in the details.

Describe the property you lost and  
how the loss occurred

Describe any insurance coverage for the loss

Include the amount that insurance has paid. List pending insurance  
claims on line 33 of Schedule A/B: Property.

Date of your  
lossValue of property  
lost

\$

**Part 7: List Certain Payments or Transfers**

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

☐ No☒ Yes. Fill in the details.

Michael L. Walker, Esq.

Person Who Was Paid

9052 Fort Hamilton PKWY

Number Street

Second Floor Suite

Brooklyn NY 11209

City State ZIP Code

mwalker@michaelwalkerlaw.com

Email or website address

Person Who Made the Payment, if Not You

Description and value of any property transferred

legal fees

Date payment or  
transfer was  
made

03/06/2024

Amount of payment

\$ 1,200.00

\$



Debtor 1

**Waldemar Ruiz Cruz**

First Name Middle Name Last Name

Case number (if known)

Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid _____ Number Street _____ _____ City State ZIP Code _____ Email or website address _____ Person Who Made the Payment, if Not You _____	_____	\$ _____
	_____	\$ _____

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  
Do not include any payment or transfer that you listed on line 16.

- ☒ No  
☐ Yes. Fill in the details.

Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid _____ Number Street _____ _____ City State ZIP Code _____	_____	\$ _____
	_____	\$ _____

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  
Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property).  
Do not include gifts and transfers that you have already listed on this statement.

- ☒ No  
☐ Yes. Fill in the details.

Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person Who Received Transfer _____ Number Street _____ _____ City State ZIP Code _____ Person's relationship to you _____		_____
Person Who Received Transfer _____ Number Street _____ _____ City State ZIP Code _____ Person's relationship to you _____		_____

Debtor 1

Waldemar Ruiz Cruz

First Name Middle Name Last Name

Case number (if known)

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called *asset-protection devices*.)

- ☒ No  
☐ Yes. Fill in the details.

Name of trust	Description and value of the property transferred	Date transfer was made

### Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☒ No  
☐ Yes. Fill in the details.

Name of Financial Institution	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Name of Financial Institution Number Street City State ZIP Code	XXXX- _ _ _ _	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____		\$ _____
Name of Financial Institution Number Street City State ZIP Code	XXXX- _ _ _ _	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____		\$ _____

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☒ No  
☐ Yes. Fill in the details.

Name of Financial Institution	Who else had access to it?	Describe the contents	Do you still have it?
Name of Financial Institution Number Street City State ZIP Code	Name Number Street City State ZIP Code		<input type="checkbox"/> No <input type="checkbox"/> Yes

Debtor 1

Waldemar Ruiz Cruz

First Name Middle Name Last Name

Case number (if known)

**22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?**☒ No☐ Yes. Fill in the details.

Who else has or had access to it?

Describe the contents

Do you still have it?

Name of Storage Facility

Name

Number Street

Number Street

City State ZIP Code

City

State

ZIP Code

☐ No☐ Yes**Part 9: Identify Property You Hold or Control for Someone Else****23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.**☒ No☐ Yes. Fill in the details.

Where is the property?

Describe the property

Value

Owner's Name

Number Street

Number Street

City

State

ZIP Code

City

State

ZIP Code

\$

**Part 10: Give Details About Environmental Information**

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

**24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?**☒ No☐ Yes. Fill in the details.

Governmental unit

Environmental law, if you know it

Date of notice

Name of site

Governmental unit

Number Street

Number Street

City

State

ZIP Code

City

State

ZIP Code

Debtor 1

Waldemar Ruiz Cruz

First Name Middle Name Last Name

Case number (if known)

## 25. Have you notified any governmental unit of any release of hazardous material?

☒ No☐ Yes. Fill in the details.

Governmental unit		Environmental law, if you know it	Date of notice
Name of site	Governmental unit		
Number Street	Number Street		
City State ZIP Code	City State ZIP Code		

## 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

☒ No☐ Yes. Fill in the details.

Court or agency	Nature of the case	Status of the case
Case title		<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Court Name		
Number Street		
Case number	City State ZIP Code	

**Part 11: Give Details About Your Business or Connections to Any Business**

## 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)  
☐ A partner in a partnership  
☐ An officer, director, or managing executive of a corporation  
☐ An owner of at least 5% of the voting or equity securities of a corporation

☒ No. None of the above applies. Go to Part 12.☐ Yes. Check all that apply above and fill in the details below for each business.

Describe the nature of the business		Employer identification number
Business Name		Do not include Social Security number or ITIN.
Number Street		EIN: _____
City State ZIP Code		Dates business existed
	Name of accountant or bookkeeper	From _____ To _____
Business Name		Employer identification number
Number Street		Do not include Social Security number or ITIN.
City State ZIP Code		EIN: _____
	Name of accountant or bookkeeper	Dates business existed
		From _____ To _____

Debtor 1

Waldemar Ruiz Cruz

First Name Middle Name Last Name

Case number (if known)

Business Name		Describe the nature of the business	Employer identification number
Number Street			Do not include Social Security number or ITIN.
City State ZIP Code			EIN: _____
		Name of accountant or bookkeeper	Dates business existed
			From _____ To _____

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

☒ No

☐ Yes. Fill in the details below.

Date Issued

Name

MM / DD / YYYY

Number Street

City

State ZIP Code

**Part 12: Sign Below**

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**X** Waldemar Ruiz-Cruz  
Signature of Debtor 1

**X** \_\_\_\_\_  
Signature of Debtor 2

Date 03/28/24

Date \_\_\_\_\_

Did you attach additional pages to Your *Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

☒ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person \_\_\_\_\_ Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

**Fill in this information to identify your case:**

Debtor 1	<b>Waldemar Ruiz Cruz</b>		
	First Name	Middle Name	Last Name

Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name

United States Bankruptcy Court for the: Eastern District of New York

Case number \_\_\_\_\_  
(If known)

☐ Check if this is an amended filing

## Official Form 108

## Statement of Intention for Individuals Filing Under Chapter 7

12/15

**If you are an individual filing under chapter 7, you must fill out this form if:**

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

**You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.**

**If two married people are filing together in a joint case, both are equally responsible for supplying correct information.**

**Both debtors must sign and date the form.**

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D), fill in the information below.

**Identify the creditor and the property that is collateral**

**What do you intend to do with the property that secures a debt?**

**Did you claim the property as exempt on Schedule C?**

Creditor's  
name:

**Description of  
property  
securing debt:**

- ☐ Surrender the property.
- ☐ Retain the property and redeem it.
- ☐ Retain the property and enter into a *Reaffirmation Agreement*.
- ☐ Retain the property and [explain]: \_\_\_\_\_

- ☐ No
- ☐ Yes

Creditor's name: \_\_\_\_\_

Description of  
property  
securing debt:

- ☐ Surrender the property.
- ☐ Retain the property and redeem it.
- ☐ Retain the property and enter into a *Reaffirmation Agreement*.
- ☐ Retain the property and [explain]: \_\_\_\_\_

- ☐ No
- ☐ Yes

Creditor's  
name:

Description of  
property  
securing debt:

- ☐ Surrender the property.
- ☐ Retain the property and redeem it.
- ☐ Retain the property and enter into a *Reaffirmation Agreement*.
- ☐ Retain the property and [explain]: \_\_\_\_\_

- ☐ No
- ☐ Yes

Creditor's name: \_\_\_\_\_

Description of  
property  
securing debt:

- ☐ Surrender the property.
- ☐ Retain the property and redeem it.
- ☐ Retain the property and enter into a  
*Reaffirmation Agreement*.
- ☐ Retain the property and [explain]: \_\_\_\_\_

- ☐ No
- ☐ Yes

Debtor 1

Waldemar Ruiz Cruz

First Name Middle Name Last Name

Case number (if known)

**Part 2: List Your Unexpired Personal Property Leases**

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 108G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Lessor's name: Honda Auto Lease

☐ No☒ Yes

Description of leased property: 2023 Honda Accord 90,000 miles

Lessor's name:

☐ No☐ Yes

Description of leased property:

Lessor's name:

☐ No☐ Yes

Description of leased property:

Lessor's name:

☐ No☐ Yes

Description of leased property:

Lessor's name:

☐ No☐ Yes

Description of leased property:

Lessor's name:

☐ No☐ Yes

Description of leased property:

Lessor's name:

☐ No☐ Yes

Description of leased property:

**Part 3: Sign Below**

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

x Waldemar Ruiz-Cruz  
Signature of Debtor 1

x \_\_\_\_\_  
Signature of Debtor 2

Date 03 28 2024  
MM / DD / YYYY

Date \_\_\_\_\_  
MM / DD / YYYY

UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF NEW YORK  
[www.nyeb.uscourts.gov](http://www.nyeb.uscourts.gov)

STATEMENT PURSUANT TO LOCAL  
BANKRUPTCY RULE 1073-2(b)

DEBTOR(S): Waldemar Ruiz Cruz CASE NO.: \_\_\_\_\_

Pursuant to Local Bankruptcy Rule 1073-2(b), the debtor (or any other petitioner) hereby makes the following disclosure concerning Related Cases, to the petitioner's best knowledge, information and belief:

[NOTE: Cases shall be deemed "Related Cases" for purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case was pending at any time within eight years before the filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are spouses or ex-spouses; (iii) are affiliates, as defined in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a partnership and one or more of its general partners; (vi) are partnerships which share one or more common general partners; or (vii) have, or within 180 days of the commencement of either of the Related Cases had, an interest in property that was or is included in the property of another estate under 11 U.S.C. § 541(a).]

☒ NO RELATED CASE IS PENDING OR HAS BEEN PENDING AT ANY TIME.

☐ THE FOLLOWING RELATED CASE(S) IS PENDING OR HAS BEEN PENDING:

1. CASE NO.: \_\_\_\_\_ JUDGE: \_\_\_\_\_ DISTRICT/DIVISION: \_\_\_\_\_

CASE STILL PENDING: (YES/NO): \_\_\_\_\_ [If closed] Date of closing: \_\_\_\_\_

CURRENT STATUS OF RELATED CASE: \_\_\_\_\_  
(Discharged/awaiting discharge, confirmed, dismissed, etc.)

MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above): \_\_\_\_\_

REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN  
SCHEDULE "A" OF RELATED CASES: \_\_\_\_\_  
\_\_\_\_\_

2. CASE NO.: \_\_\_\_\_ JUDGE: \_\_\_\_\_ DISTRICT/DIVISION: \_\_\_\_\_

CASE STILL PENDING: (YES/NO): \_\_\_\_\_ [If closed] Date of closing: \_\_\_\_\_

CURRENT STATUS OF RELATED CASE: \_\_\_\_\_  
(Discharged/awaiting discharge, confirmed, dismissed, etc.)

MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above): \_\_\_\_\_

REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN  
SCHEDULE "A" OF RELATED CASES: \_\_\_\_\_  
\_\_\_\_\_



[OVER]

**DISCLOSURE OF RELATED CASES (cont'd)**

3. CASE NO.: \_\_\_\_\_ JUDGE: \_\_\_\_\_ DISTRICT/DIVISION: \_\_\_\_\_

CASE STILL PENDING: (YES/NO): \_\_\_\_\_ [If closed] Date of closing: \_\_\_\_\_

CURRENT STATUS OF RELATED CASE: \_\_\_\_\_  
(Discharged/awaiting discharge, confirmed, dismissed, etc.)

MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above): \_\_\_\_\_

REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN  
SCHEDULE "A" OF RELATED CASES: \_\_\_\_\_  
\_\_\_\_\_

**NOTE:** Pursuant to 11 U.S.C. § 109(g), certain individuals who have had prior cases dismissed within the preceding 180 days may not be eligible to be debtors. Such an individual will be required to file a statement in support of his/her eligibility to file.

**TO BE COMPLETED BY DEBTOR/PETITIONER'S ATTORNEY, AS APPLICABLE:**

I am admitted to practice in the Eastern District of New York (Y/N): Y

**CERTIFICATION** (to be signed by pro-se debtor/petitioner or debtor/petitioner's attorney, as applicable):

I certify under penalty of perjury that the within bankruptcy case is not related to any case now pending or pending at any time, except as indicated elsewhere on this form.

\_\_\_\_\_  
Signature of Debtor's Attorney

\_\_\_\_\_  
Signature of Pro-se Debtor/Petitioner

\_\_\_\_\_  
Mailing Address of Debtor/Petitioner

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

**NOTE:** Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF NEW YORK

In Re:

Case No. \_\_\_\_\_

Waldemar Ruiz Cruz

Debtor(s)

---

PRE-PETITION STATEMENT PURSUANT TO LOCAL RULE 2017-1

1. The Debtor was informed and advised regarding bankruptcy prior to and up until the filing of the petition by MICHAEL L. WALKER, Esq.
2. The pre-petition conference lasted about a 1.5 (hr).
3. Inquiries were made concerning the following:
  - a. Petitioner's motivation for bankruptcy;
  - b. Petitioner's marital status;
  - c. Extent and nature of petitioner's assets;
  - d. Petitioner's residence;
  - e. Extent and nature of petitioner's debts, including the existence of any non dischargeable debts;
  - f. In a Chapter 13, feasibility, including petitioner's income, expenses and motivation and lifestyle;
  - g. Prior bankruptcies;
  - h. Transfers of property within the last six years;
  - i. Miscellaneous items arising out of the debtor's financial condition which would have an impact on the bankruptcy;
  - j. All the facts and circumstances concerning the debtor's financial condition which would have an impact on the bankruptcy.
4. The Debtor was also given the choice between a Chapter 7 or a Chapter 13 and the consequences of the respective proceedings.
5. The Debtor, with what the attorney determines to be a simple case, was offered the option of a "prose bankruptcy" wherein this firm prepares the papers, provides no courtroom representation and does not function as a contact with the debtor's creditors.
6. The debtor has been advised that if the case requires extensive litigation that they will be billed at \$350.00 per hour once the initial retainer has been expended.

7. Petitioner has been advised that no petition will be filed until the fee listed in the 2016(b) statement has been paid in full.
8. In addition to the pre-petition conference, the following services were rendered:

<u>Time</u>	<u>Services</u>	<u>Date</u>
1.5 Hrs.	Obtaining financial Information	03/16/2024
2.0 Hrs.	Preparation of papers	03/16/2024
.5 Hr.	Signing of petition	03/16/2024

9. That my law firm will be representing the debtor(s) at the first meeting of creditors.
10. That our usual rate of compensation on bankruptcy matters is on a per services basis not an hourly basis and is also based on the debtor's income.

Dated: Brooklyn, NY  
March 16, 2024

Michael L. Walker, Esq.  
Attorney for the Debtor

By: \_\_\_\_\_/s/\_\_\_\_\_  
Michael L. Walker, Esq.  
9052 Fort Hamilton Pkwy, 2<sup>nd</sup> FL  
Brooklyn, NY 11209  
(718)-680-9700

B2030 (Form 2030) (12/15)

## United States Bankruptcy Court

Eastern District Of New York

In re

Waldemar Ruiz CruzCase No. 7

Debtor

Chapter \_\_\_\_\_

## DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept ..... \$ 1200.00Prior to the filing of this statement I have received ..... \$ 1200.00Balance Due ..... \$ 0

2. The source of the compensation paid to me was:

☒ Debtor☐ Other (specify)

3. The source of compensation to be paid to me is:

☐ Debtor☐ Other (specify)

4. ☐ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

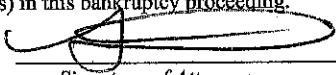
☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
  - Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
  - Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030) (12/15)

- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION	
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.	
<u>3/28/2024</u> Date	 Signature of Attorney
	<u>Law Offices of Michael Lubliner</u> Name of law firm

**UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF NEW YORK**

-----X  
**In Re:**

Waldemar Ruiz Cruz

**Case No.**

**Chapter 7**

**Debtor(s)**  
-----X

**VERIFICATION OF CREDITOR MATRIX/LIST OF CREDITORS**

The undersigned debtor(s) or attorney for the debtor(s) hereby verifies that the creditor matrix/list of creditors submitted herein is true and correct to the best of his or her knowledge.

Dated: 03/28/2024

Waldemar Ruiz-Cruz  
Debtor

\_\_\_\_\_  
Joint Debtor

s/  
\_\_\_\_\_  
Attorney for Debtor

Honda Financial Services  
PO Box 70252  
Philadelphia, PA 19176

Freedom Road Financial  
PO Box 4597  
Oak Brook, IL 60522

First Tech Federal Credit Union  
PO Box 2780  
Portland, Oregon 97208

Bridgecrest  
PO Box 842695  
Los Angeles, CA 90084

BMW Financial Services  
PO Box 78103  
Phoenix, AZ 85062

Capital One Credit Card  
PO Box 4069  
Carol Stream, IL 60197  
SYNCHRONY BANK/ AMAZON  
PO BOX 71711  
PHILADELPHIA, PA 19176

APPLE MASTERCARD  
GOLDMAN SACHS BANK, LOCKBOX 6112  
PO BOX 7247  
PHILADELPHIA, PA 19170

DISCOVER CREDIT CARD  
PO BOX 70176  
PHILADELPHIA, PA 19176

CREDIT ONE BANK  
PO BOX 60500  
CITY OF INDUSTRY, CA 91716

CREDIT ONE BANK  
PO BOX 60500  
CITY OF INDUSTRY, CA 91716

CREDIT ONE BANK  
PO BOX 60500  
CITY OF INDUSTRY, CA 91716

UPGRADE FINANCIAL  
2 N. CENTRAL AVENUE  
FLOOR 10  
PHOENIX, AZ 85004



**Fill in this information to identify your case:**

Debtor 1 Waldemar Ruiz Cruz  
 First Name Middle Name Last Name

Debtor 2  
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of New York

Case number  
 (If known) \_\_\_\_\_

**Check one box only as directed in this form and in Form 122A-1Supp:**

- ☒ 1. There is no presumption of abuse.
- ☐ 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 122A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.

☐ Check if this is an amended filing

**Official Form 122A-1****Chapter 7 Statement of Your Current Monthly Income**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

**Part 1: Calculate Your Current Monthly Income****1. What is your marital and filing status? Check one only.**

- ☒ **Not married.** Fill out Column A, lines 2-11.
- ☐ **Married and your spouse is filing with you.** Fill out both Columns A and B, lines 2-11.
- ☐ **Married and your spouse is NOT filing with you. You and your spouse are:**
- ☐ **Living in the same household and are not legally separated.** Fill out both Columns A and B, lines 2-11.
- ☐ **Living separately or are legally separated.** Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

**Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case.** 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
<b>2. Your gross wages, salary, tips, bonuses, overtime, and commissions</b> (before all payroll deductions).	\$ <u>4,000.00</u>	\$ <u>0.00</u>
<b>3. Alimony and maintenance payments.</b> Do not include payments from a spouse if Column B is filled in.	\$ <u>0.00</u>	\$ <u>0.00</u>
<b>4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support.</b> Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ <u>0.00</u>	\$ <u>0.00</u>
<b>5. Net income from operating a business, profession, or farm</b>	Debtor 1 Gross receipts (before all deductions) \$ _____ Ordinary and necessary operating expenses - \$ _____ Net monthly income from a business, profession, or farm \$ <u>0.00</u>	Debtor 2 Gross receipts (before all deductions) \$ _____ Ordinary and necessary operating expenses - \$ _____ Net monthly income from a business, profession, or farm \$ <u>0.00</u>
	Copy here →	\$ <u>0.00</u>
<b>6. Net income from rental and other real property</b>	Debtor 1 Gross receipts (before all deductions) \$ _____ Ordinary and necessary operating expenses - \$ _____ Net monthly income from rental or other real property \$ <u>0.00</u>	Debtor 2 Gross receipts (before all deductions) \$ _____ Ordinary and necessary operating expenses - \$ _____ Net monthly income from rental or other real property \$ <u>0.00</u>
	Copy here →	\$ <u>0.00</u>
<b>7. Interest, dividends, and royalties</b>	\$ _____	\$ <u>0.00</u>

Debtor 1

**Waldemar Ruiz Cruz**

First Name Middle Name Last Name

Case number (if known)

Column A  
Debtor 1Column B  
Debtor 2 or  
non-filing spouse**8. Unemployment compensation**Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:  $\downarrow$ 

For you ..... \$

For your spouse ..... \$

\$ 0.00

\$ 0.00

**9. Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act.

\$ 0.00

\$ 0.00

**10. Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.

\$ 0.00

\$ 0.00

\$ 0.00

\$ 0.00

+ \$ 0.00

+ \$ 0.00

Total amounts from separate pages, if any.

**11. Calculate your total current monthly income.** Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

\$ 4,000.00

+

\$ 0.00

=

\$ 4,000.00

Total current  
monthly income**Part 2: Determine Whether the Means Test Applies to You****12. Calculate your current monthly income for the year.** Follow these steps:12a. Copy your total current monthly income from line 11. .... Copy line 11 here  $\rightarrow$ 

\$ 4,000.00

Multiply by 12 (the number of months in a year).

x 12

12b. The result is your annual income for this part of the form.

12b.

\$ 48,000.00

**13. Calculate the median family income that applies to you.** Follow these steps:

Fill in the state in which you live.

NY

Fill in the number of people in your household.

2

Fill in the median family income for your state and size of household. .... 13.

\$ 84,089.00

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

**14. How do the lines compare?**14a. ☒ Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.* Go to Part 3.14b. ☐ Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2.* Go to Part 3 and fill out Form 122A-2.**Part 3: Sign Below**

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

x Waldemar Ruiz-Cruz

Signature of Debtor 1

x

Signature of Debtor 2

Date 03/28/2004  
MM/DD/YYYYDate \_\_\_\_\_  
MM/DD/YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

**Fill in this information to identify your case:**

Debtor 1	Waldemar Ruiz Cruz		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name

United States Bankruptcy Court for the: Eastern District of New York

Case number \_\_\_\_\_  
(If known)

Check the appropriate box as directed in lines 40 or 42:

According to the calculations required by this Statement:

☒ 1. There is no presumption of abuse.

☐ 2. There is a presumption of abuse.

☐ Check if this is an amended filing

## Official Form 122A-2

## Chapter 7 Means Test Calculation

12/15

To fill out this form, you will need your completed copy of *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1).

**Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).**

## Part 1: Determine Your Adjusted Income

1. **Copy your total current monthly income.** ..... Copy line 11 from Official Form 122A-1 here → ..... \$ 4,000.00

2. **Did you fill out Column B in Part 1 of Form 122A-1?**

☒ No. Fill in \$0 for the total on line 3.

☐ Yes. Is your spouse filing with you?

☐ No. Go to line 3.

☐ Yes. Fill in \$0 for the total on line 3.

3. **Adjust your current monthly income by subtracting any part of your spouse's income not used to pay for the household expenses of you or your dependents.** Follow these steps:

On line 11, Column B of Form 122A-1, was any amount of the income you reported for your spouse NOT regularly used for the household expenses of you or your dependents?

☒ No. Fill in 0 for the total on line 3.

☐ Yes. Fill in the information below:

State each purpose for which the income was used For example, the income is used to pay your spouse's tax debt or to support people other than you or your dependents	Fill in the amount you are subtracting from your spouse's income
_____	\$ _____
_____	\$ _____
_____	+ \$ _____
<b>Total.</b> .....	\$ <u>0.00</u>

Copy total here ..... → - \$ 0.00

4. **Adjust your current monthly income.** Subtract the total on line 3 from line 1.

**\$ 4,000.00**

Debtor 1

Waldemar Ruiz Cruz

First Name Middle Name Last Name

Case number (if known)

**Part 2: Calculate Your Deductions from Your Income**

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted from your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from income in lines 5 and 6 of Form 122A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the form refers to *you*, it means both you and your spouse if Column B of Form 122A-1 is filled in.

**5. The number of people used in determining your deductions from income**

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

2

**National Standards** You must use the IRS National Standards to answer the questions in lines 6-7.

- 6. Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$ 1,200.00

- 7. Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are under 65 and people who are 65 or older—because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

**People who are under 65 years of age**

- 7a. Out-of-pocket health care allowance per person

\$ 0.00

- 7b. Number of people who are under 65

x 0

- 7c. **Subtotal.** Multiply line 7a by line 7b.

\$ 0.00 Copy here → \$ 0.00

**People who are 65 years of age or older**

- 7d. Out-of-pocket health care allowance per person

\$ 0.00

- 7e. Number of people who are 65 or older

x 0

- 7f. **Subtotal.** Multiply line 7d by line 7e.

\$ 0.00 Copy here → + \$ 0.00

- 7g. **Total.** Add lines 7c and 7f.

\$ 0.00

Copy total here → \$ 0.00

Debtor 1

Waldemar Ruiz Cruz

First Name Middle Name Last Name

Case number (if known)

**Local Standards** You must use the IRS Local Standards to answer the questions in lines 8-15.

Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:

- Housing and utilities – Insurance and operating expenses
- Housing and utilities – Mortgage or rent expenses

To answer the questions in lines 8-9, use the U.S. Trustee Program chart.

To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

8. **Housing and utilities – Insurance and operating expenses:** Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. \$ 0.00

9. **Housing and utilities – Mortgage or rent expenses:**

9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. \$ 0.00

9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Name of the creditor

Average monthly payment

0

\$ 0.00

\$ \_\_\_\_\_

+ \$ \_\_\_\_\_

Total average monthly payment

\$ 0.00

Copy here →

– \$ 0.00

Repeat this amount on line 33a.

- 9c. Net mortgage or rent expense.

Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this amount is less than \$0, enter \$0.

\$ 0.00Copy here → \$ 0.00

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim. \$ \_\_\_\_\_

Explain why:

11. **Local transportation expenses:** Check the number of vehicles for which you claim an ownership or operating expense.



0. Go to line 14.



1. Go to line 12.



2 or more. Go to line 12.

12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area.

\$ 581.58

Debtor 1

Waldemar Ruiz Cruz

First Name Middle Name Last Name

Case number (if known)

13. **Vehicle ownership or lease expense:** Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles.

**Vehicle 1** Describe Vehicle 1: 2023 Honda Accord Lease

13a. Ownership or leasing costs using IRS Local Standard. .... \$ 1,550.00

13b. Average monthly payment for all debts secured by Vehicle 1.

Do not include costs for leased vehicles.

To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you filed for bankruptcy. Then divide by 60.

Name of each creditor for Vehicle 1

Average monthly payment

\$ \_\_\_\_\_

+ \$ \_\_\_\_\_

Total average monthly payment

\$ \_\_\_\_\_

Copy here →

— \$ \_\_\_\_\_

Repeat this amount on line 33b.

13c. Net Vehicle 1 ownership or lease expense

Subtract line 13b from line 13a. If this amount is less than \$0, enter \$0. ....

\$ 1,550.00

Copy net Vehicle 1 expense here →

\$ 1,550.00

**Vehicle 2** Describe Vehicle 2: BMW Motorcycle

13d. Ownership or leasing costs using IRS Local Standard. .... \$ 207.00

13e. Average monthly payment for all debts secured by Vehicle 2.

Do not include costs for leased vehicles.

Name of each creditor for Vehicle 2

Average monthly payment

\$ \_\_\_\_\_

+ \$ \_\_\_\_\_

Total average monthly payment

\$ \_\_\_\_\_

Copy here →

— \$ \_\_\_\_\_

Repeat this amount on line 33c.

13f. Net Vehicle 2 ownership or lease expense

Subtract line 13e from 13d. If this amount is less than \$0, enter \$0. ....

\$ 207.00

Copy net Vehicle 2 expense here →

\$ 207.00

14. **Public transportation expense:** If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the *Public Transportation* expense allowance regardless of whether you use public transportation.

\$ 0.00

15. **Additional public transportation expense:** If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for *Public Transportation*.

\$ 0.00

Debtor 1

Waldemar Ruiz Cruz

First Name Middle Name Last Name

Case number (if known)

**Other Necessary Expenses**

In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.

16. **Taxes:** The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, Social Security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.  
Do not include real estate, sales, or use taxes. \$ 0.00
17. **Involuntary deductions:** The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs.  
Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. \$ 0.00
18. **Life insurance:** The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term. \$ 0.00
19. **Court-ordered payments:** The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.  
Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. \$ 0.00
20. **Education:** The total monthly amount that you pay for education that is either required:  
☐ as a condition for your job, or  
☐ for your physically or mentally challenged dependent child if no public education is available for similar services. \$ 0.00
21. **Childcare:** The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.  
Do not include payments for any elementary or secondary school education. \$ 0.00
22. **Additional health care expenses, excluding insurance costs:** The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.  
Payments for health insurance or health savings accounts should be listed only in line 25. \$ 0.00
23. **Optional telephones and telephone services:** The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.  
Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted. + \$ 150.00
24. **Add all of the expenses allowed under the IRS expense allowances.**  
Add lines 6 through 23. \$ 150.00

Debtor 1

Waldemar Ruiz Cruz

First Name Middle Name Last Name

Case number (if known)

**Additional Expense Deductions**

These are additional deductions allowed by the Means Test.

Note: Do not include any expense allowances listed in lines 6-24.

- 25. Health insurance, disability insurance, and health savings account expenses.** The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.

Health insurance \$ 0.00

Disability insurance \$ 0.00

Health savings account + \$ 0.00

Total \$ 0.00

Copy total here → \$ 0.00

Do you actually spend this total amount?

☐ No. How much do you actually spend? \$☒ Yes

- 26. Continuing contributions to the care of household or family members.** The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b).

\$ 0.00

- 27. Protection against family violence.** The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.

\$ 0.00

By law, the court must keep the nature of these expenses confidential.

- 28. Additional home energy costs.** Your home energy costs are included in your insurance and operating expenses on line 8.

If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs.

\$ 0.00

You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary.

- 29. Education expenses for dependent children who are younger than 18.** The monthly expenses (not more than \$156.25\* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school.

\$ 0.00

You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23.

\* Subject to adjustment on 4/01/16, and every 3 years after that for cases begun on or after the date of adjustment.

- 30. Additional food and clothing expense.** The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.

\$ 600.00

To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

You must show that the additional amount claimed is reasonable and necessary.

- 31. Continuing charitable contributions.** The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 26 U.S.C. § 170(c)(1)-(2).

+ \$ 0.00

- 32. Add all of the additional expense deductions.**

Add lines 25 through 31.

\$ 600.00



Debtor 1

**Waldemar Ruiz Cruz**

First Name

Middle Name

Last Name

Case number (if known)

**Deductions for Debt Payment****33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e.**

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

			Average monthly payment
<b>Mortgages on your home:</b>			
33a. Copy line 9b here .....	→	\$	0.00
<b>Loans on your first two vehicles:</b>			
33b. Copy line 13b here .....	→	\$	
33c. Copy line 13e here .....	→	\$	
33d. List other secured debts:			
Name of each creditor for other secured debt	Identify property that secures the debt	Does payment include taxes or insurance?	
Lakeview	home	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$ 0.00
_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes	\$ _____
_____	_____	<input type="checkbox"/> No <input type="checkbox"/> Yes	+ \$ _____
33e. Total average monthly payment. Add lines 33a through 33d.....			\$ 0.00

Copy total  
here →

\$ 0.00

**34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?**☒ No. Go to line 35.

☐ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the *cure amount*). Next, divide by 60 and fill in the information below.

Name of the creditor	Identify property that secures the debt	Total cure amount	Monthly cure amount
_____	_____	\$ _____ ÷ 60 =	\$ _____
_____	_____	\$ _____ ÷ 60 =	\$ _____
_____	_____	\$ _____ ÷ 60 =	+ \$ _____
Total			\$ 0.00

Copy total  
here →

\$ 0.00

**35. Do you owe any priority claims such as a priority tax, child support, or alimony — that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.**☒ No. Go to line 36.

☐ Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.

Total amount of all past-due priority claims ..... \$ 0.00 ÷ 60 = \$ 0.00

Debtor 1

Waldemar Ruiz Cruz

First Name Middle Name Last Name

Case number (if known)

**36. Are you eligible to file a case under Chapter 13?** 11 U.S.C. § 109(e).For more information, go online using the link for *Bankruptcy Basics* specified in the separate instructions for this form. *Bankruptcy Basics* may also be available at the bankruptcy clerk's office.☒ No. Go to line 37.☐ Yes. Fill in the following information.

Projected monthly plan payment if you were filing under Chapter 13

\$ \_\_\_\_\_

Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).

X \_\_\_\_\_

To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

Average monthly administrative expense if you were filing under Chapter 13

\$ \_\_\_\_\_

Copy total  
here →

\$ \_\_\_\_\_

**37. Add all of the deductions for debt payment.**

Add lines 33e through 36. \_\_\_\_\_

\$ 0.00

**Total Deductions from Income****38. Add all of the allowed deductions.**Copy line 24, *All of the expenses allowed under IRS expense allowances* ..... \$ 1,500.00Copy line 32, *All of the additional expense deductions* ..... \$ 2,557.00Copy line 37, *All of the deductions for debt payment* ..... + \$ 0.00

Total deductions

\$ 4,057.00

Copy total here →

\$ 4,057.00

**Part 3: Determine Whether There is a Presumption of Abuse****39. Calculate monthly disposable income for 60 months**39a. Copy line 4, *adjusted current monthly income* ..... \$ 4,000.0039b. Copy line 38, *Total deductions* ..... - \$ 4,057.0039c. Monthly disposable income. 11 U.S.C. § 707(b)(2).  
Subtract line 39b from line 39a.

\$ -57.00

Copy  
here →

\$ -57.00

For the next 60 months (5 years).....

x 60

39d. Total. Multiply line 39c by 60.....

\$ -3,420.00

Copy  
here →

\$ -3,420.00

**40. Find out whether there is a presumption of abuse. Check the box that applies:**☒ The line 39d is less than \$7,475\*. On the top of page 1 of this form, check box 1, *There is no presumption of abuse*. Go to Part 5.☐ The line 39d is more than \$12,475\*. On the top of page 1 of this form, check box 2, *There is a presumption of abuse*. You may fill out Part 4 if you claim special circumstances. Then go to Part 5.☐ The line 39d is at least \$7,475\*, but not more than \$12,475\*. Go to line 41.

\* Subject to adjustment on 4/01/16, and every 3 years after that for cases filed on or after the date of adjustment.

Debtor 1

Waldemar Ruiz Cruz

First Name Middle Name Last Name

Case number (if known)

41. 41a. **Fill in the amount of your total nonpriority unsecured debt.** If you filled out A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form.....

\$ \_\_\_\_\_

x .25

- 41b. **25% of your total nonpriority unsecured debt.** 11 U.S.C. § 707(b)(2)(A)(i)(I).  
Multiply line 41a by 0.25. ....

\$ \_\_\_\_\_

Copy  
here →

\$ \_\_\_\_\_

42. **Determine whether the income you have left over after subtracting all allowed deductions is enough to pay 25% of your unsecured, nonpriority debt.**

Check the box that applies:

☒ **Line 39d is less than line 41b.** On the top of page 1 of this form, check box 1, *There is no presumption of abuse.*  
Go to Part 5.

☐ **Line 39d is equal to or more than line 41b.** On the top of page 1 of this form, check box 2, *There is a presumption of abuse.* You may fill out Part 4 if you claim special circumstances. Then go to Part 5.

#### Part 4: Give Details About Special Circumstances

43. **Do you have any special circumstances that justify additional expenses or adjustments of current monthly income for which there is no reasonable alternative?** 11 U.S.C. § 707(b)(2)(B).

☒ No. Go to Part 5.

☒ Yes. Fill in the following information. All figures should reflect your average monthly expense or income adjustment for each item. You may include expenses you listed in line 25.

You must give a detailed explanation of the special circumstances that make the expenses or income adjustments necessary and reasonable. You must also give your case trustee documentation of your actual expenses or income adjustments.

Give a detailed explanation of the special circumstances

Average monthly expense  
or income adjustment

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\$ \_\_\_\_\_  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_

#### Part 5: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

x Waldemar Ruiz-Cruz  
Signature of Debtor 1

x \_\_\_\_\_  
Signature of Debtor 2

Date 03/28/2024  
MM/DD/YYYY

Date \_\_\_\_\_  
MM/DD/YYYY